## AMENDED IN ASSEMBLY APRIL 7, 2008 AMENDED IN ASSEMBLY MARCH 25, 2008

CALIFORNIA LEGISLATURE—2007—08 REGULAR SESSION

## ASSEMBLY BILL

No. 2527

## **Introduced by Assembly Member Berg**

February 21, 2008

An act to amend Sections 14132.44 and 14132.47 of the Welfare and Institutions Code, relating to Medi-Cal.

## LEGISLATIVE COUNSEL'S DIGEST

AB 2527, as amended, Berg. Medi-Cal: Targeted Case Management and Administrative Claiming process programs.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income persons receive health care services.

Under existing law, targeted case management (TCM) is a covered benefit under the Medi-Cal program. Existing law requires a TCM provider to be a local governmental agency (LGA) under contract with the department to provide TCM services, and permits a TCM provider to contract with a nongovernmental entity or the University of California, or both, to provide TCM services on its behalf under the conditions specified by the department in regulations.

This bill would, instead, authorize a LGA to contract with any private or public entity to provide TCM services on its behalf under the conditions specified by the department in regulations.

Existing law authorizes the department to contract with LGAs or local education consortiums to assist with the performance of administrative activities necessary for the proper and efficient administration of the

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Medi-Cal program, which is known as the Administrative Claiming process. Existing law authorizes a LGA to subcontract with nongovernmental entities, as defined, to assist with the performance of these administrative activities.

This bill would, instead, authorize a LGA or a local education consortium to subcontract with any private or public entity to assist with the performance of the above-described administrative activities and would make conforming changes.

Existing law requires a local governmental agency that elects to provide TCM services, and each local governmental agency or local educational consortium participating in the Administrative Claiming process, to certify the availability and expenditure of 100% of the nonfederal share for the provision of either TCM services or the cost of performing administrating claiming activities, as provided.

This bill would permit, to the extent consistent with federal law, as to TCM services, a local governmental agency, and, as to Administrative Claiming process activities, a local governmental agency or a local educational consortium, to certify appropriate expenditures made by another state or local public entity, as provided.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 14132.44 of the Welfare and Institutions 2 Code is amended to read:
- 3 14132.44. (a) Targeted case management (TCM), pursuant to
- 4 Section 1915(g) of the Social Security Act as amended by Public
- 5 Law 99-272 (42 U.S.C. Sec. 1396n(g)), shall be covered as a
- benefit, effective January 1, 1995. Nothing in this section shall be
- 7 construed to require any local governmental agency to implement 8 TCM.
- 9 (b) A TCM provider furnishing TCM services shall be a local 10 governmental agency under contract with the department to provide 11 TCM services. Local educational agencies shall not be providers
- TCM services. Local educational agencies shall not be providers of case management services under this section.
- 13 (c) A TCM provider may contract with any private or public 14 entity to provide TCM services on its behalf under the conditions
- 15 specified by the department in regulations.

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(d) Each TCM provider shall have all of the following:

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- 1 (1) Established procedures for performance monitoring.
  - (2) A countywide system to prevent duplication of services and to ensure coordination and continuity of care among providers of case management services provided to beneficiaries who are eligible to receive case management services from two or more programs.
  - (3) A fee mechanism effective January 1, 1995, specific to TCM services provided, which may vary by program.
  - (e) A TCM service provider or an entity under contract with a TCM provider may provide TCM services to one or all of the following groups of Medi-Cal beneficiaries, which shall be defined in regulation:
  - (1) High-risk persons.

- (2) Persons who have language or other comprehension barriers.
- 15 (3) Persons on probation.
- (4) Persons who have exhibited an inability to handle personal,medical, or other affairs.
  - (5) Persons abusing alcohol or drugs, or both.
  - (6) Adults at risk of institutionalization.
- 20 (7) Adults at risk of abuse or neglect.
  - (f) (1) A local governmental agency that elects to provide TCM services to the groups specified in subdivision (e) shall, for each fiscal year, for the purpose of obtaining federal medicaid matching funds, submit an annual cost report as prescribed by the department that certifies all of the following:
  - (A) The availability and expenditure of 100 percent of the nonfederal share for the provision of TCM services from the local governmental agency's general fund or from any other funds allowed under federal law and regulation. To the extent consistent with federal law, a local governmental agency may certify appropriate expenditures for TCM services that are made by another state or local public entity. The local governmental agency shall obtain and retain appropriate certifications from the expending state or local public entity and retain documentation, as required by the department.
    - (B) The amount of funds expended on allowable TCM services.
  - (C) Its expenditures represent costs that are eligible for federal financial participation.
- 39 (D) The costs reflected in the annual cost reports used to determine TCM rates are developed in compliance with the

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definitions contained in the Office of Management and Budget (OMB) Circular A-87.

- (E) Case management services provided in accordance with Section 1396n(g) of Title 42 of the United States Code will not duplicate case management services provided under any homeand community-based services waiver.
- (F) Claims for providing case management services pursuant to this section will not duplicate claims made to public agencies or private entities under other program authorities for the same purposes.
  - (G) The requirements of subdivision (d) have been met.
- (2) The department shall deny any claim if it determines that any certification required by this subdivision is not adequately supported for purposes of federal financial participation.
- (g) Only a local governmental agency may submit TCM service claims to the department for the performance of TCM services.
- (h) During the period from January 1, 1995, through June 30, 1995, TCM services shall be reimbursed according to the interim mechanism developed by the state and the Health Care Financing Administration, which is reflected in the document entitled "Agreement Between the Health Care Financing Administration and the State of California, Department of Health Services." For the 1995–96 fiscal year, the department shall establish an initial rate of reimbursement. Effective July 1, 1996, and thereafter, TCM services shall be reimbursed in accordance with regulations that shall be adopted by the department.
- (i) The department, in consultation with local governmental agencies, and consistent with federal regulations, and the State Medicaid Manual of the Department of Health and Human Services, Health Care Financing Administration, shall adopt regulations that define TCM services, establish the standards under which TCM services qualify as a Medi-Cal reimbursable service, prescribe the methodology for determining the rate of reimbursement, and establish a claims submission and processing system and method to certify local matching expenditures.
- (j) (1) Notwithstanding any other provision of this section, the state shall be held harmless, in accordance with paragraphs (2) and (3) from any federal audit disallowance and interest resulting from payments made by the federal medicaid program as reimbursement for claims for providing TCM services pursuant

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to this section, less the amounts already remitted to the state pursuant to subdivision (m) for the disallowed claim.

- (2) To the extent that a federal audit disallowance and interest results from a claim or claims for which any local governmental agency has received reimbursement for TCM services, the department shall recoup from the local governmental agency that submitted that disallowed claim, through offsets or by a direct billing, amounts equal to the amount of the disallowance and interest, in that fiscal year, less the amounts already remitted to the state pursuant to subdivision (m) for the disallowed claim. All subsequent claims submitted to the department applicable to any previously disallowed claim, may be held in abeyance, with no payment made, until the federal disallowance issue is resolved.
- (3) Notwithstanding paragraphs (1) and (2), to the extent that a federal audit disallowance and interest results from a claim or claims for which the local governmental agency has received reimbursement for TCM services performed by an entity under contract with, and on behalf of, the participating local governmental agency, the department shall be held harmless by that particular local governmental agency for 100 percent of the amount of any such federal audit disallowance and interest, less the amounts already remitted to the state pursuant to subdivision (m) for the disallowed claim.
- (k) The use of local matching funds required by this section shall not create, lead to, or expand the health care funding obligations or service obligations for current or future years for each local governmental agency, except as required by this section or as may be required by federal law.
- (*l*) TCM services are services which assist beneficiaries to gain access to needed medical, social, educational, and other services. Services provided by TCM providers, and their subcontractors, shall be defined in regulation, and shall include at least one of the following:
- 34 (1) Assessment.

- 35 (2) Plan development.
- 36 (3) Linkage and consultation.
- 37 (4) Assistance in accessing services.
- 38 (5) Periodic review.
- 39 (6) Crisis assistance planning.

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(m) (1) Each local governmental agency shall contribute to the department a portion of the agency's general fund that has been made available due to the coverage of services described in this section under the Medi-Cal program. The contributed funds shall be reinvested in health services through the Medi-Cal program. The total contribution amount shall be equal to 33 \( \frac{1}{3} \) percent of the amounts that have been made available under this section, but in no case shall this contribution exceed twenty million dollars (\$20,000,000) in a fiscal year less the amount contributed pursuant to subdivision (m) of Section 14132.47. Beginning with the 1994-95 fiscal year, each local governmental agency's share of the total contribution shall be determined by claims submitted and approved for payment through January 1 of the following calendar year. Claims received and approved for payment after January 1 for dates of service in the previous fiscal year shall be included in the following year's calculation. Each local governmental agency's share of the contribution for the previous fiscal year shall be determined no later than February 15 and shall be remitted to the state no later than April 1 of each year. The contribution amount shall be paid from nonfederal, general fund revenues, and shall be deposited in the Targeted Case Management Claiming Fund, which is hereby created, for transfer to the Health Care Deposit Fund. 

- (2) Moneys received by the department pursuant to this subdivision are hereby continuously appropriated, notwithstanding Section 13340 of the Government Code, to the department for the support of the Medi-Cal program, and the funds shall be administered in accordance with procedures prescribed by the Department of Finance. If not paid as provided in this section, the department may offset payments due to each local governmental agency from the state, not related to payments required to be made pursuant to this section, in order to recoup these funds for the Targeted Case Management Claiming Fund.
- (3) This subdivision shall only apply to claims approved for the 1994–95 to 1997–98 fiscal years, inclusive.
- (n) As a condition of participation and in consideration of the joint effort of the local governmental agencies and the department in implementing this section and the ongoing need of local governmental agencies to receive technical support from the department, as well as assistance in claims processing and program monitoring, the local governmental agencies shall cover the costs

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of the administrative activities performed by the department. Each local governmental agency shall annually pay a portion of the total costs of administrative activities performed by the department through a mechanism agreed to by the department and the local governmental agencies, or if no agreement is reached by August 1 of each year, directly to the state. The department shall determine and report the staffing requirements upon which projected costs will be based. Projected costs shall include the anticipated salaries, benefits, and operating expenses necessary to administer targeted case management.

(o) For the purposes of this section a "local governmental agency" means a county or chartered city.

- SEC. 2. Section 14132.47 of the Welfare and Institutions Code is amended to read:
- 14132.47. (a) It is the intent of the Legislature to provide local governmental agencies the choice of participating in either or both of the Targeted Case Management (TCM) and Administrative Claiming process programs at their option, subject to the requirements of this section and Section 14132.44.
- (b) The department may contract with each participating local governmental agency or each local educational consortium to assist with the performance of administrative activities necessary for the proper and efficient administration of the Medi-Cal program, pursuant to Section 1396b(a) of Title 42 of the United States Code, Section 1903a of the federal Social Security Act, and this activity shall be known as the Administrative Claiming process.
- (c) (1) As a condition for participation in the Administrative Claiming process, each participating local governmental agency or each local educational consortium shall, for the purpose of claiming federal medicaid matching funds, enter into a contract with the department and shall certify to the department the amount of local governmental agency or each local educational consortium general funds or any other funds allowed under federal law and regulation expended on the allowable administrative activities.
- (2) The department shall deny the claim if it determines that the certification is not adequately supported for purposes of federal financial participation.
- (d) Each participating local governmental agency or local educational consortium may subcontract with private or public entities to assist with the performance of administrative activities

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necessary for the proper and efficient administration of the
Medi-Cal program under the conditions specified by the department
in regulations.

- (e) Each Administrative Claiming process contract shall include a requirement that each participating local governmental agency or each local educational consortium submit a claiming plan in a manner that shall be prescribed by the department in regulations, developed in consultation with local governmental agencies.
- (f) The department shall require that each participating local governmental agency or each local educational consortium certify to the department both of the following:
- (1) The availability and expenditure of 100 percent of the nonfederal share of the cost of performing Administrative Claiming process activities. The funds expended for this purpose shall be from the local governmental agency's general fund or the general funds of local educational agencies or from any other funds allowed under federal law and regulation. To the extent consistent with federal law, a local governmental agency or local educational consortium may certify appropriate expenditures for administrative activities covered under the Administrative Claiming process, which are made by another state or local public entity. The local governmental agency or local educational consortium shall obtain and retain appropriate certifications from the expending state or local public entity and retain documentation, as required by the department.
- (2) In each fiscal year that its expenditures represent costs that are eligible for federal financial participation for that fiscal year. The department shall deny the claim if it determines that the certification is not adequately supported for purposes of federal financial participation.
- (g) (1) Notwithstanding any other provision of this section, the state shall be held harmless, in accordance with paragraphs (2) and (3), from any federal audit disallowance and interest resulting from payments made to a participating local governmental agency or local educational consortium pursuant to this section, less the amounts already remitted to the state pursuant to subdivision (m) for the disallowed claim.
- (2) To the extent that a federal audit disallowance and interest results from a claim or claims for which any participating local governmental agency or local educational consortium has received

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reimbursement for Administrative Claiming process activities, the department shall recoup from the local governmental agency or local educational consortium that submitted the disallowed claim, through offsets or by a direct billing, amounts equal to the amount of the disallowance and interest, in that fiscal year, less the amounts already remitted to the state pursuant to subdivision (m) for the disallowed claim. All subsequent claims submitted to the department applicable to any previously disallowed administrative activity or claim, may be held in abeyance, with no payment made, until the federal disallowance issue is resolved.

- (3) Notwithstanding paragraph (2), to the extent that a federal audit disallowance and interest results from a claim or claims for which the participating local governmental agency or local educational consortium has received reimbursement for Administrative Claiming process activities performed by an entity under contract with, and on behalf of, the participating local governmental agency or local educational consortium, the department shall be held harmless by that particular participating local governmental agency or local educational consortium for 100 percent of the amount of the federal audit disallowance and interest, less the amounts already remitted to the state pursuant to subdivision (m) for the disallowed claim.
- (h) The use of local matching funds required by this section shall not create, lead to, or expand the health care funding obligations or service obligations for current or future years for any participating local governmental agency or local educational consortium, except as required by this section or as may be required by federal law.
- (i) The department shall deny any claim from a participating local governmental agency or local educational consortium if the department determines that the claim is not adequately supported in accordance with criteria established pursuant to this subdivision and implementing regulations before it forwards the claim for reimbursement to the federal medicaid program. In consultation with local government agencies and local educational consortia, the department shall adopt regulations that prescribe the requirements for the submission and payment of claims for administrative activities performed by each participating local governmental agency and local educational consortium.

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(j) Administrative activities shall be those determined by the department to be necessary for the proper and efficient administration of the state's medicaid plan and shall be defined in regulation.

- (k) If the department denies any claim submitted under this section, the affected participating local governmental agency or local educational consortium may, within 30 days after receipt of written notice of the denial, request that the department reconsider its action. The participating local governmental agency or local educational consortium may request a meeting with the director or his or her designee within 30 days to present its concerns to the department after the request is filed. If the director or his or her designee cannot meet, the department shall respond in writing indicating the specific reasons for which the claim is out of compliance to the participating local governmental agency or local educational consortium in response to its appeal. Thereafter, the decision of the director shall be final.
- (*l*) Participating local governmental agencies or local educational consortium may claim the actual costs of nonemergency, nonmedical transportation of Medi-Cal eligibles to Medi-Cal covered services, under guidelines established by the department, to the extent that these costs are actually borne by the participating local governmental agency or local educational consortium. A local educational consortium may only claim for nonemergency, nonmedical transportation of Medi-Cal eligibles for Medi-Cal covered services, through the Medi-Cal administrative activities program. Medi-Cal medical transportation services shall be claimed under the local educational agency Medi-Cal billing option, pursuant to Section 14132.06.
- (m) (1) Each participating local governmental agency shall contribute to the department a portion of the agency's general fund that has been made available due to the coverage of administrative activities described in this section under the Medi-Cal program. The contributed funds shall be reinvested in health services through the Medi-Cal program. The total contribution amount shall be equal to  $33\frac{1}{3}$  percent of amounts made available under this section, but in no case shall the contribution exceed twenty million dollars (\$20,000,000) a fiscal year less the amount contributed pursuant to subdivision (m) of Section 14132.44. Beginning with the 1994–95 fiscal year, each local governmental agency's share of

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1 the total contribution shall be determined by claims submitted and 2 approved for payment through January 1 of the following calendar 3 year. Claims received and approved for payment after January 1 4 for dates of service in the previous fiscal year shall be included in 5 the following year's calculation. Each local governmental agency's 6 share of the contribution for the previous fiscal year shall be 7 determined no later than February 15 and shall be remitted to the 8 state no later than April 1 of each year. The contribution amount 9 shall be paid from nonfederal, general fund revenues and shall be 10 deposited in the Administrative Claiming Fund for transfer to the 11 Health Care Deposit Fund.

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- (2) Moneys received by the department pursuant to this subdivision are hereby continuously appropriated to the department for support of the Medi-Cal program, and the funds shall be administered in accordance with procedures prescribed by the Department of Finance. If not paid as provided in this section, the department may offset payments due to each participating local governmental agency from the state, not related to payments required to be made pursuant to this section in order to recoup these funds for the Administrative Claiming Fund.
- (3) This subdivision shall only apply to claims approved for the 1994–95 to 1997–98 fiscal years, inclusive.
- (n) As a condition of participation in the Administrative Claiming process and in recognition of revenue generated to each participating local governmental agency and each local educational consortium in the Administrative Claiming process, each participating local governmental agency and each local educational consortium shall pay an annual participation fee through a mechanism agreed to by the state and local governmental agencies and local educational consortia, or, if no agreement is reached by August 1 of each year, directly to the state. The participation fee shall be used to cover the cost of administering the Administrative Claiming process, including, but not limited to, claims processing, technical assistance, and monitoring. The department shall determine and report staffing requirements upon which projected costs will be based. The amount of the participation fee shall be based upon the anticipated salaries, benefits, and operating expenses, to administer the Administrative Claiming process and other costs related to that process.

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(o) For the purposes of this section "participating local governmental agency" means a county, chartered city, Native American Indian tribe, tribal organization, or subgroup of a Native American Indian tribe or tribal organization, under contract with the department pursuant to subdivision (b).

- (p) For purposes of this section, "local educational agency" means a local educational agency, as defined in subdivision (h) of Section 14132.06, that participates under the Administrative Claiming process as a subcontractor to the local educational consortium in its service region.
- (q) (1) For purposes of this section, "local educational consortium" means a local agency that is one of the service regions of the California County Superintendent Educational Services Association.
- (2) Each local educational consortium shall contract with the department pursuant to paragraph (1) of subdivision (c).
- (r) (1) Each participating local educational consortium shall be responsible for the local educational agencies in its service region that participate in the Administrative Claiming process. This responsibility includes, but is not limited to, the preparation and submission of all administrative claiming plans, training of local educational agency staff, overseeing the local educational agency time survey process, and the submission of detailed quarterly invoices on behalf of any participating local educational agency.
- (2) Each participating local educational consortium shall ensure local educational agency compliance with all requirements of the Administrative Claiming process established for local governmental agencies.
- (3) Ninety days prior to the initial participation in the Administrative Claiming process, each local educational consortium shall notify the department of its intent to participate in the process, and shall identify each local educational agency that will be participating as its subcontractor.
- (s) (1) Each local educational agency that elects to participate in the Administrative Claiming process shall submit claims through its local educational consortium or through the local governmental agency, but not both.
- (2) Each local educational agency participating as a subcontractor to a local educational consortium shall comply with

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all requirements of the Administrative Claiming process established
 for local governmental agencies.
 (t) The requirements of subdivision (m) shall not apply to claims

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- (t) The requirements of subdivision (m) shall not apply to claims for administrative activities, pursuant to the Administrative Claiming process, performed by public health programs administered by the state.
- (u) A participating local governmental agency or a local educational consortium may charge an administrative fee to any entity claiming Administrative Claiming through that agency.
- (v) The department shall continue to administer the Administrative Claiming process in conformity with federal requirements.
- (w) The department shall provide technical assistance to all participating local governmental agencies and local educational consortia in order to maximize federal financial participation in the Administrative Claiming process.
- 17 (x) This section shall be applicable to Administrative Claiming 18 process activities performed, and to moneys paid to participating 19 local governmental agencies for those activities in the 1994–95 20 fiscal year and thereafter, and to local educational consortia in the 21 1998–99 fiscal year and thereafter.